

Colorado Secretary of State
1700 Broadway, Suite 270
Denver, CO 80290
(303) 894-2200
(303) 869-4861 Fax
www.sos.state.co.us



**CANDIDATE ACCEPTANCE OF
DESIGNATION AND DECLARATION OF QUALIFICATION ATTORNEY GENERAL**
[C.R.S. 1-4-601 & 1-4-1304]

To the Honorable Gigi Dennis, Colorado Secretary of State:

This is to certify that the undersigned accepts the nomination for the office listed and that I am qualified to hold said office upon election and that the following information is true and correct to the best of my belief and how I wish my name to appear on the official ballot:

Title of Office/District: _____

Name of Candidate: _____

(WARNING: THIS IS HOW YOUR NAME WILL APPEAR ON THE BALLOT)

Address of Candidate: _____

City, State, Zip Code: _____

Party Affiliation: _____ Date of Affiliation: _____

County of Registration: _____ Precinct of Registration: _____

Date of Birth of Candidate: _____

Qualifications for Office: At least 25 years of age, resident of Colorado at least two years prior to the
election and a citizen of the United States of America. Licensed attorney of the Supreme Court of the state of
Colorado in good standing.

Candidate Signature

Date

STATE OF COLORADO
COUNTY OF _____

Subscribed and affirmed before me this _____ day of _____, 20____

SEAL

NOTARY PUBLIC

My Commission Expires: _____